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Patricia VanMierlo

Eastern Illinois University

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Challenges of Wellness Programming

In Midwest Colleges and Universities
(TITLE)

BY

Patricia VanMierlo

THESIS

SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS
FOR THE DEGREE OF

Master of Science in Physical Education

IN THE GRADUATE SCHOOL, EASTERN ILLINOIS UNIVERSITY
CHARLESTON, ILLINOIS

1996
YEAR

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Challenges of
Wellness Programming
In Midwest
Colleges and Universities

by

Patricia VanMierlo

for:
Dr. Croisant
Dr. Owen
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12/5/96

ABSTRACT

Challenges of Wellness Programming in Midwest Colleges and Universities

by

Patricia VanMierlo

This study was conducted to investigate challenges associated with programming wellness activities in the university setting. Telephone interviews were conducted with 50 college/university wellness program coordinators in the Midwest United States. Campus Recreation/Recreational Sports employed 72% of the respondents, the remainder were employed by Athletics, Health Services, Physical Education, or a combination of those listed. Likert scales were used to gauge degree of barrier severity and amount of collaboration with various university departments. Ninety-eight percent of coordinators work with professionals outside of the department in which they were employed. The departments that most often collaborate include Campus Recreation, Health Services, and Physical Education, and Athletics. Challenges programmers face include financing, understaffing, and facility space. When ranked in order of severity, financial issues (mean 1.85) were of greatest concern. Following financial issues was interdepartmental cooperation (mean 1.98). The least faced barrier was participation (mean 2.14). Individually assessed on a 1-10 scale, advertising, or lack of promotion of programs was the largest barrier (mean 7.32). Barriers in descending order include: Lack of staff, facility space, budget constraints, and lack of equipment. Solutions to these barriers were offered by wellness program coordinators who have faced these issues.

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CHAPTER 1

INTRODUCTION

Mass media campaigns sponsored by federal, state and local agencies have increased public awareness of the benefits of a healthy lifestyle in disease prevention (Kraft, 1993). As the populations concerns for their health increased, universities and colleges across the nation have been establishing wellness programs. "Wellness", may be defined as a set of personal activities, interests, and opinions related to one's health. These activities may include, but are not limited to, physical fitness, nutrition, stress management, and environment (Kraft, 1993). When establishing these wellness programs, which offer a magnitude of services, universities have encountered some problems. There has been very little research done on these problems that are unique to the college/university setting.

According to Kraft (1993), problems include the inability to effectively measure the impact of wellness programs, and the lack of research regarding wellness. Most research measuring the benefits of programs use insurance cuts, citing financial aspects affecting businesses that house wellness programs. However, since there are no costs for participants in many campus recreation programs, and universities do not receive "cuts" in insurance plans if a certain percentage take part in campus recreation programs, it is not an effective measuring tool. The success of many campus recreation activities is determined by participation, which does not always measure outcomes to the specific goals set by the programmer.

A pilot study indicated that one of the largest barriers wellness programmers encounter when establishing campus wellness programs is interdepartmental communication. Other potential problems for universities wishing to establish wellness

programs include funding, facility availability, and staffing. Research is necessary to establish challenges that have been encountered and overcome by program coordinators with existing wellness programs. Once this is known, programmers in the initiating stages of program development can be aware of possible barriers and of solutions.

Purpose of the Study

The purpose of this study was to identify the challenges and barriers that programmers encounter when establishing a wellness program in a college or university. Problems associated with establishing university wellness programs must be identified in order to find effective solutions to the problems. Overcoming the barriers will greatly enhance the ability of a college/university to serve the campus community.

Scope of the Study

This study was conducted through telephone survey. The target population included wellness program coordinators at all universities and colleges in Illinois, Indiana, Ohio, Michigan, and Wisconsin that were listed as having established wellness programs in the 1995 Recreational Sports Directory (Holsberry, 1995).

Limitations of the Study

Some unforeseen factors that influenced the results of the study include:

1. Inability to reach proper person due to position changes.
2. Program coordinators' limited awareness of other programs offered on their campus.
3. Some universities or colleges that have existing wellness programs may not have been listed in the 1995 Recreational Sports Directory (Holsberry, 1995), and therefore were left out of this study.

Definitions of Terms

Wellness. The five dimensions widely accepted by health care researchers: self-responsibility, nutritional awareness, stress awareness and management, physical fitness, and environmental sensitivity. Social and spiritual dimensions are two other that have more recently been included in the wellness concept (Kraft, 1993).

Wellness services. All services, including workshops, assessments, lectures, information, flyers, newsletters, exercise sessions, special events, counseling, education, or rehabilitation intended to compliment the participant's needs as stated in the wellness dimensions (Gebhardt, 1990).

Program accountability. The compliance to changing behavior and achieving goals (Cooper, 1984).

CHAPTER 2

LITERATURE REVIEW

When establishing a wellness program, a coordinator needs to set goals and objectives for the program. Through the evaluation of employee fitness and health promotion programs within private and government sectors, Cooper (1984) has identified critical factors in program accountability. The three most critical factors in the establishment of a program are as follows:

1. Human benefit.
2. Program models and program elements.
3. Organizational commitment to the wellness program.

The Human Benefit

Human benefit is the increase in health and self esteem which leads to a reduction in absenteeism from work. People take part in the program because it makes them feel good. "In viewing the sources of variance for success or failure in the effort, we can interpret them as: 50% leadership, 40% program (including facility), and 10% organization...Most participants will not go through what must be done to change behavior unless there is a skilled leader who practices what he/she teaches. Leadership allows all the other things to happen." (Cooper, 1984).

Campus recreation leaders have been making programs that have established themselves as significant elements of student life. Benefits believed to be associated with participation in personal health and fitness programs include social interaction, leadership skills, self-actualization, self-esteem, stress release, and often the retention of students (Snodgrass, 1990). Snodgrass indicated, "Students do seek to promote their social,

emotional, and physical wellness, through recreational sports programs, as indicated by their motivation to reduce stress, balance their lives, and interact socially. This coincides with a national trend of increasing emphasis on wellness and with growing numbers of Americans exercising to reduce stress." The documentation of the growing numbers of students participating in these programs is perhaps the best indicator for the need of the programs. The decrease in the participation in competitive sports is not surprising if the student's purpose for participation is stress reduction. Informal sports, including emphasis on instructional and recreational sports, offer lifetime participation focusing on the emotional conditioning of feelings of mastery, achievement, and positive self image (Snodgrass, 1990).

Program Models

There are basically three models of wellness programs. The three models are the single department plan, the cooperative plan, and the college-corporate joint venture (Schmid, 1990).

The single department plan is where one facility houses all the wellness services the coordinator wishes to offer. An example of this plan is the University of Illinois at Champaign/Urbana. The wellness center is housed within their campus recreation building. The facility is equipped with rehabilitation equipment, information, assessment equipment, and has a dietitian, a certified athletic trainer to do rehabilitation, an exercise physiologist, and a receptionist. This model is most ideal since it can easily be the place where students, (faculty, and staff), go for all services. This is not a desirable department plan if more than one department has the goal to offer all services to all people. Funding, competition between departments, and disagreements over placement of the center prevents many departments from having successful single department plans.

The cooperative plan, or "wellness linkage" model has many advantages. The plan links all departments on campus that offer any kind of wellness service. The

departments work together to fund, staff, and advertise wellness services offered by all departments. This ideally promotes good campus politics, allowing departments to establish relationships with other departments with which they otherwise would not have had any contact (Schmid, 1990). This plan is most likely to be the most successful if a skilled leader can create an atmosphere where all departments can work together to achieve a common goal without competition. After a single department plan failed at the University of Notre Dame, a 12 member task force was created. Combining the departments offering wellness services allowed the task force to combine budgets to financially support the wellness program with \$30,000 to \$40,000 a year.

The college-corporate venture is a situation where a company pays the university/college a contracted amount of money to use the programs and facilities of the university. This is not viable for every institution. An example of this arrangement is in Manhattanville College where Nestle Foods Corporation formed Healthworks, a partnership that provides both parties with a top-notch wellness program at a fraction of the cost of individual programs at each place (Schmid, 1990). This is also a good political move for students to become involved in the Nestle Corporation as interns to gain valuable work experience.

Program Elements

Program elements are more than services. A wellness program may offer many services that are different at each location. Establishing goals, marketing, and evaluation of the services are the program elements necessary to have a successful program (Schmid, 1990). The most important element one must consider in establishing a wellness program is focusing on goals. Use the services to reach a goal set in the wellness dimensions. "Design programs that meet a need and make sure you have the staff and monetary resources available to support them (Schmid, 1990)." Secondly, when goals are

established find effective ways of marketing your services. Evaluation is the final step in the program elements which allows for changes and experimentation.

Organizational Commitment

Organizational commitment involves the support of the students (or employees in the corporate world), staff members, and other department personnel and it involves financial backing. For the purposes of this study, the organization is the university/college.

Commitment must be for long term. Behaviors do not change immediately, they need to be learned. Many times the process is a progressive one. For example, a student wishes to take part in smoking cessation therapy and needs a new habit like exercise to replace the old one. Is there an exercise program for this student that is fun, moderate, convenient, and does what it is intended to do (keep the student from smoking)? Finding the appropriate exercise program may take some time. This long term commitment must be realized by everyone in the organization (Cooper, 1984).

Commitment encompasses being patient. With commitment comes support. One example of this is a department hiring a full time wellness director. The wellness director needs the support of the staff beyond simply hiring them on. Commitment starts with supporting the new colleague in having juice and muffins offered at staff meetings instead of donuts and coffee. It involves offering gum, popcorn, pretzels, nuts, and other healthful items in vending machines. It involves removing cigarette machines, and replacing them with a small refrigerator and a microwave (Schott, 1992).

The other departments need to be supportive as well as non-competitive. This is true especially in the cooperative plan where departments are working together to support one another. In environments where competition between departments is a barrier, common goals should be established. Departments striving toward a common goal should be recognized for their commitment to wellness. Supporting special events or

activities outside of the department is an excellent team building activity, as well as silent recognition for another department's efforts.

Financial support is a big issue. Much of the literature reports the dramatic cuts in the corporate insurance premiums which gives businesses a logical way of "spending a little money to save a lot of money". This does not help the justification for wellness programs in the university/college setting. Administrators allocating funds often look at participation rates as justification for funding and evaluating the success of a program. How can you judge participation without offering the programs?

Conclusion

Wellness programming involves three critical factors to be successful in program accountability. The three factors are the human benefit, the program elements and models, and organizational commitment including the support of the program. The human benefit involves genuine concern for the needs of students, taking those needs and creating programs. The program models are the college-corporate joint venture, the cooperative department plan, and the single department plan. The program elements involve setting goals to meet the needs of the students, appropriately marketing the services to the students, and effectively evaluating programs. The entire organization must support wellness programming or it will not be successful.

There are many research questions that need an answer. How can campus recreation departments justify the need for a wellness program to central administration? Does participation in wellness/fitness related programs reduce the absenteeism of college students? Are participants in wellness/fitness programs learning positive lifestyle changes? Do participants in campus wellness programs choose careers in corporations that support wellness programming? Continued research is necessary to identify motivations and needs of specific student populations (Snodgrass, 1990). Research is

also needed to identify problems encountered by wellness professionals attempting to establish programs on university/college campuses.

Targeting barriers programmers have faced in the development of programs will establish common situations that are unique to the university/college setting. Directors of departments or schools who desire to establish wellness programs do not presently have foresight of what issues exist, and therefore are unprepared. It is necessary that barriers and solutions are exposed .

CHAPTER 3

METHODOLOGY AND PROCEDURES

The purpose of this study was to identify the challenges and barriers that programmers encounter when establishing university/college wellness programs. These barriers must be identified in order to find effective solutions. By identifying and overcoming these barriers, it will enable programmers to enhance the services offered to the college community.

Development of the Survey

After reviewing issues that worksite health promotion professionals have faced (Bertera, 1990; Gebhardt, 1990; Schott, 1992), the researcher developed a survey. The pilot study was conducted in the state of Illinois. Revisions were made to the survey to more appropriately target the coordinators of university/college wellness programs in Illinois, Indiana, Ohio, Michigan, and Wisconsin. The survey was three pages in length, including demographics and a comment section on the final page. Questions related to how long the department offered wellness services, other departments coordinators work with, as well as a rating scale for barriers coordinators have encountered. A copy of the questionnaire is located in the appendix.

Description of the Sample

The target sample was derived from the 1995 Recreational Sports Directory (Holsberry, 1995), which listed all four year universities/colleges in the United States.

This directory also lists what types of programs are offered at each institution. The states in the Midwest United States that had wellness programs as documented in this directory were included in this study. The following 53 universities/colleges were targeted as a sample for this study:

Illinois

Eastern Illinois University
University of Illinois at Urbana/Champaign
Loyola University at Chicago
Midwestern University
Millikin University
Northern Illinois University
Northwestern University
Parks College of Saint Louis University
Southern Illinois University at Carbondale and Edwardsville

Indiana

Ball State University
University of Evansville
Indiana Institute of Technology
Indiana University-Purdue University at Indianapolis and Fort Wayne
Indiana Wesleyan University
University of Indiana-Indianapolis
Manchester College
University of Notre Dame
Purdue University at West Lafayette
Rose-Hulman Institute of Technology
Saint Joseph's College
Saint Mary's College
Tri-State University
Valparaiso University

Ohio

Ashland University
Baldwin Wallace College
Bowling Green State University
Case Western Reserve University
University of Cincinnati
Kent State University at Kent
Miami University at Oxford
University of Toledo
Xavier University

Wisconsin

Marquette University

University of Wisconsin at Eau Claire, LaCrosse, Parkside, Stevens Point, Stout, Superior

Michigan

Adrian College

Albion College

Aquinas College

Central Michigan University

Eastern Michigan University

Grand Valley State University

Hope College

Kalamazoo College

Lake Superior State University

Michigan State University

University of Michigan

Western Michigan University

Data Collection Techniques

A telephone survey was conducted of the target sample. Since summer is less hectic for university/college program coordinators, all were initially contacted via informational postcard in May. The initial telephone survey contact occurred June 1, 1995 through August 15, 1995. Repeat calls (up to ten) were made through October 31, at which time data was compiled on 50 surveys. Three surveys were not completed. Indiana Institute of Technology declined because programs offered are only available to student athletes. No direct contact was made at Midwestern University and at the University of Illinois. The target person to contact was the wellness program coordinator. In the absence of the wellness program coordinator (after 5 calls), the director or supervisor of the wellness coordinator was reached. This worked well for the

universities/colleges which had a vacant wellness coordinator position. Additional comments were invited at the conclusion of the survey .

Data Analysis

Upon completion of the telephone interviews, frequency counts and percentages were compiled using the Statistical Package for Social Sciences (SPSS). Results are discussed in the following chapter.

CHAPTER 4

RESULTS AND DISCUSSION

Fifty questionnaires were completed through telephone interview. The National Wellness Information Resource Center Directory (1992; 1995) was used to find out some basic information about contacts and some background information about each wellness program.

Demographics of Surveyed Professionals

Demographic information was captured by optional response through the questionnaire. Results indicate that 42% of those surveyed have held their current position for 1-5 years (refer to table 1). More than half have held their position between one and ten years (refer to table 2). Sixty-two percent of those surveyed were women, and 32% male. Age specifications ranged from 25 years to 41+ years (refer to table 3). Physical Education is the major most often reported by these wellness professionals, followed by Leisure Studies. Physical Education includes Exercise Science, and it should be noted that some colleges/universities house Sports Administration in Leisure Studies.

Table 1: Length of Time in Current Position

Response	<i>n</i>	%
< 1 year	1	2
1 - 5 years	21	42
6 - 10 years	12	24
10 + years	7	14
no response	9	18

Table 2: Years of Experience (Reported by Percent)

Response	<i>n</i>	%
< 1 year	0	0
1 - 5 years	19	38
6 - 10 years	14	28
10 + years	8	16
no response	9	18

Table 3: Age Specifications of Respondents (Reported by Percent)

Response	<i>n</i>	%
< 25 years	0	0
25 - 30 years	11	22
31 - 40 years	18	36
41 + years	11	22
no response	10	20

Questionnaire Results

Illinois, Wisconsin, Michigan, Ohio, and Indiana were all represented in the sample. Fifty surveys out of fifty-three were completed. One institution declined the survey (Indiana Institute of Technology), because services were only offered to student athletes. The program leaders at University of Illinois, and Midwestern Illinois were unable to complete the interview because no direct contact was made. Seventy-two percent of the wellness directors responding to the survey were employed in Campus Recreation/Recreational Sports, while 10% were employed by Athletics, 6% by Health

Services, and 4% were employed through the Physical Education Department. Some (8%) were employed by a combination of the above listed departments.

Illinois, Wisconsin, Michigan, Ohio, and Indiana were all represented by completion of the questionnaire. Forty-three respondents, 81%, were interested in the results of this study. This a very reassuring result because it indicates the desire wellness professionals have to become more educated and exposed to situations others have encountered and resolved when programming.

The questionnaire was based on opinion not recorded information that would be difficult for the respondent to answer. The following is a summary of the questionnaire and results.

Program Establishment

Seventy-two percent of the respondents were involved in either the establishment of the wellness program or supervised the development process. Programs in the newer stages are fewer than existing programs (refer to table 4) but the success indicates that there is a model to follow.

Table 4: Length of Time Services Have Been Offered (Reported by Percent)

Response	<i>n</i>	%
1st year	6	12
2-4 years	14	28
5+ years	30	60

Collaboration

Question three revealed that 49 of the 50 respondents indicated that they work with other professionals. They were then asked to indicate on the given scale how often they worked with each department.

The departments that most program leaders work with often include Campus Recreation (94%), Health Services (61.2%), and Physical Education (60.9%). There were 34% of responses that fell into the “Other (including Athletics)” category. The departments that were collaborated with the least (rarely/never) were Campus Police (77.1%), Career Planning and Placement (62.5%). The majority of wellness coordinators responded to working with multiple departments within the university. This collaboration was verified by responses gathered in question number seven regarding the development of task forces or wellness teams (refer to table 5).

Table 5: Frequency Respondents Report Working With Other Wellness Professionals (Reported by Percentage)

Department	Never	Rarely	Sometimes	Often
Health Services	8.2	8.2	22.4	61.2
Residential Life	10.9	26.1	39.1	23.9
Campus Recreation	0	2	4	94
Prevention Office	11.9	28.6	23.8	35.7
Physical Education	8.7	17.4	13	60.9
Counseling	14	18	40	28
Campus Police	45.8	31.3	16.7	6.3
Career Placement	39.6	22.9	16.7	20.8
Student Activities	10.8	28	42	20
Other (including Athletics)	0	1.9	9.4	34

Services

Program leaders find professional journals to be somewhat to very important. Not one program leader felt that the journals were useless, however, some addressed concerns regarding the lack of time to read the journals they do receive. Conferences, and interaction with other professionals in the field are valued as the most important service that benefits program coordinators. Although organizations are viewed as important, most programmers expressed that these services are underutilized.

Table 6: Importance of Services (Reported by Percentage)

	Not Important	Somewhat Important	Very Important
Journals	0	54	46
Conferences	0	20	80
Organizations	0	52	48

Barriers

The primary barrier was targeted as finance related issues (average rank of 1.85). Departmental cooperation was perceived as the second highest barrier (average rank of 1.98). Participation rates ranked as less of a barrier (average rank of 2.14). Please refer to table 7.

Table 7: Barriers in the Establishment of Wellness Programs (Reported by Percent)

Rank	1	2	3
Financial	37.5	39.6	22.9
Participation	32.7	20.4	46.9
Interdepartmental Cooperation	31.1	39.6	29.2

Using a scale from 1-10, respondents chose the number that indicates the severity of the barrier the particular issue is. (1 indicates not encountered, 10 indicates extreme barrier). Most barriers were rated at the higher end of the scale with one exception. Over half of the respondents felt that they were supported financially to attend professional

development activities (mean 3.42). Understaffing (mean 6.40), and advertising (mean 7.32), issues were consistently perceived as being more serious barriers. Facility space (mean 6.14), also held significance as a perceived barrier, although that may be altered with the growing trend of universal support for new campus recreation facilities (refer to table 8).

Table 8: Severity of Barriers (Collectively) (Reported by Percent)

Barrier	1	2	3	4	5	6	7	8	9	10
lack of equipment	-	8.0	14.0	10.0	24.0	12.0	16.0	12.0	2.0	2.0
facility space	8.0	6.0	2.0	4.0	20.0	10.0	14.0	18.0	10.0	8.0
lack of staff	6.0	4.0	6.0	2.0	18.0	10.0	12.0	18.0	18.0	6.0
budget constraints	4.0	4.0	10.0	12.0	12.0	18.0	16.0	2.0	12.0	10.0
\$ limited for prof. devel.	16.0	28.0	16.0	16.0	6.0	6.0	6.0	4.0	2.0	-
advertising	-	6.0	4.0	6.0	2.0	8.0	14.0	26.0	20.0	14.0

Barriers placed on a scale, numbers represent percentage of responses at that level.

Communication and cooperation between staff in program coordinators' departments is better than communication outside of the department (refer to tables 9 and 10, and figure 11).

Table 9: Communication and Cooperation Within Own Department (Reported by Percent)

Response	<i>n</i>	%
Poor	0	-
Fair	3	6.0
Good	35	70.0
Excellent	12	24.0

Table 10: Communication and Cooperation Outside of Own Department (Reported by Percent)

Response	<i>n</i>	%
Poor	2	4.0
Fair	20	40.0
Good	24	48.0
Excellent	4	8.0



Figure 11: A Comparison of Communication and Cooperation Between Staff Members in Own Department, and Outside Departments

Solutions

Personal responses were welcomed specifically on how barriers were overcome. Refer to tables 12-16 to find solutions as stated by program coordinators for each barrier. Solutions were listed in order of survey number, not by priority or most often stated solution.

Table 12: Solutions to Understaffing Barrier

Solutions
<ul style="list-style-type: none"> ◆ Proposal submitted for full-time wellness position. ◆ Use internship students. ◆ Hired Wellness Coordinator Position. ◆ No full-time administrator, 8 part-time. ◆ Added 6 Grad. Asst. to cover.

Table 13: Solutions to the Lack of Promotion Barrier

Solutions
<ul style="list-style-type: none"> ◆ Develop a National Journal. ◆ Opened Wellness Resource Center. ◆ Advertise on radio and TV. ◆ Increasing presentations helped increase awareness of programs. ◆ Increase media coverage.

Table 14: Solutions to Communication Barriers

Solutions
<ul style="list-style-type: none"> ◆ Joint facilities for Recreation, Physical Education, & Athletics. ◆ Developed task force. ◆ Consistency. ◆ Maintenance of positive relationships within the university. ◆ Private consulting firm contacted to analyze problems. ◆ Consistent definition of “Wellness” is needed because this varies between universities. Not enough is known about Campus Wellness. ◆ Program supports abstinence after conflicts arose over religion/HIV education.

Table 15: Solutions to Budget Constraints

Solution
<ul style="list-style-type: none"> ◆ A 12 member task force was created and combined budgets to create a \$30,000-\$40,000/year budget. ◆ Decrease full-time position to a part-time wellness coordinator. ◆ Donation received from Health Benefit providers. ◆ Charge for services to increase the budget. ◆ Increase student fees.

Table 16: Solutions to Facility and Equipment Barriers

Solution
<ul style="list-style-type: none">◆ Joint facilities for Recreation, Physical Education, & Athletics.◆ New facility.◆ Creative programming and scheduling.◆ General fee increase.

Summary

Fifty questionnaires were completed and results were calculated on October 31, 1995. Forty-three respondents (81%) were interested in the results of this study. The advantage of this sample and the timing of the study was that approximately 2/3 of respondents were involved in the development of a wellness program. Additionally, 60% of those surveyed work with departments that have offered wellness services for 5 or more years.

Nearly all (98%) of coordinators work with other professionals in different departments. The departments that most often collaborate are Campus Recreation, Health Services, and Physical Education, and Athletics. Departments least associated with were Campus Police and Career Planning and Placement. Of the respondents, 72% were employed by Campus Recreation/Recreational Sports, 10% were employed by Athletics, 6% by Health Services, 4% in Physical Education. The remainder were employed by a combination of these departments.

The service that program leaders felt most important was conferences, where they were able to hear about what other programmers were doing. There were responses indicating that journals and organizations were viewed as important. No one indicated that these services are not important.

Barriers wellness programmers face were ranked with financial as most severe followed by interdepartmental cooperation. The least faced barrier (most often listed as third in severity) was participation. Barrier severity, rated on a scale of 1-10 scale using mean scores revealed the following:

Table 17
Barriers to Programming in Order of Severity (According to Mean Scores)

Issue	Mean
Advertising	7.32
Lack of Staff	6.40
Facility Space	6.14
Budget Constraints	5.94
Lack of Equipment	5.36
Lack of Funding for Professional Development	3.42

Advertising, or the promotion of programs was the largest barrier encountered, followed by lack of staff, facility space, budget constraints, and lack of equipment. The issue of professional development was ranked lowest of all, indicating there is enough financial support for program coordinator's to attend continuing education activities such as conferences. Communication within coordinators' departments were perceived as better than that of those professionals in other departments. The communication with outside departments is key to overcoming many obstacles as reported in the comments section of the questionnaire.

Comments from respondents included solutions to staffing issues, advertisement, communication, budget constraints, and facility space and equipment. The questionnaire included a demographic section that revealed most wellness program coordinators average from 25-31 years of age, are women, and have a Master's Degree.

CHAPTER FIVE

SUMMARY, CONCLUSIONS, RECOMMENDATIONS

Summary and Conclusion

The purpose of this project was to identify the challenges programmers face when establishing a wellness program at a college/university. A questionnaire was designed to target wellness program coordinators at universities/colleges in the Midwest. In addition to challenges, suggestions were obtained from the programmers. These suggestions from veteran wellness program initiators are intended to offer newer programs (40% of campus recreation wellness programs are 0-4 years in progression) some potential solutions based on experiences. According to the survey, 80% respect other professional opinions more so than any other source, which indicates a positive reception to this information.

Challenges programmers face include financing, understaffing, and facility space. Other problems that exist are the lack equipment, problems with advertising, and communication between departments in the university. There are no easy answers to deal effectively with these issues. For this reason, more needs to be done by current wellness professionals to document how mistakes and situations they have encountered can be avoided. The resource document needs to offer inexpensive and time effective suggestions for the recreation director.

The results of this study can be used to illustrate to top administrators the wellness trend. The wellness trend is the development of campus-wide task forces, additional staff needs, and increased participation level by staff, faculty, and by students. University administrators should be receptive because the programs service many participants. There are program coordinators who want to establish wellness programs for universities through linking departments, or creating a new wellness center. Many of these interested faculty and students are willing to do the work on a volunteer basis. If potential problems are recognized prior to a project, programmers know what to expect. They may not be able to avoid all situations, but they know what exists at this time.

Suggestions

The wellness profession in the college/university setting is a growing industry. The needs of the students, faculty and staff are the concern of recreation leaders. To best fit the needs of these people, the leaders need appropriate education, training, and reference material. Since the field is so broad, it would be beneficial to bring all the ideas and basic skills together in written form to help students, younger professionals, and directors who do not necessarily have the knowledge or skills to do wellness programming. The Natural High Program (1994) is a good reference, but is far from a manual for establishing a wellness program. Problems are basically financial, facility space, and staffing. The need for **inexpensive**, time efficient techniques is going unrecognized. The lack of this type of reference is hindering our profession. The wellness profession could be a lot farther along if everyone pooled their resources to share commonly made mistakes and timely solutions.

One comment received indicated campus recreation departments get little money for programming activities "other departments should be programming". Working cooperatively with other departments on campus for special events is offering the wellness services but on a far too sporadic, limited, and basic level. NIRSA Natural High Program (1994) is a great way to kick things off because it offers a regular, inexpensive, consistent, complete set of workshops that any programmer can implement.

Recommendations for Future Study

There are many research questions that need answers. How can campus recreation departments justify the need of a wellness program to central administration? Does participation in wellness/fitness related programs reduce the absenteeism of college students? Are participants in wellness/fitness programs learning positive lifestyle changes? Do participants in campus wellness programs choose careers in corporations that support wellness programming? Continued research is necessary to identify motivations and needs of specific student populations (Snodgrass, 1990).

Because of these findings, a researcher must establish a study for nation wide representation to further identify concerns and problems of program planners and find reasonable ways of dealing with those issues, and make a model program despite the barriers.

REFERENCES

- Bertera, R.L. (1990). Planning and implementing health promotion in the workplace: A case study of the Du Pont Company experience. Health Education Quarterly, 17(3), 307-327.
- Cooper, K.H., and Collingwood, T.R. (1984). Programming issues for total well being. Journal of Physical Education, Recreation, and Dance, 22-23, 44.
- Gebhardt, D.L., Crump, C.E. (1990). Employee fitness and wellness programs in the workplace. American Psychologist, Feb, 262-272.
- Holsberry, W., Kovac, N.S., and Peltz, B. (1995). Recreational Sports Directory. National Intramural-Recreational Sports Association, Corvallis, Oregon.
- Kingery, Paul M. (1990). Self-efficacy and the self-monitoring of selected exercise and eating behaviors of college students. Health Education, Jan/Feb, 27-29.
- Kraft, F.B., Goodell, P.W. (1993). Identifying the health conscious consumer. Journal of Health Care Marketing, Fall, 18-25.
- National Intramural-Recreational Sports Association "Natural High" Program Manual. (1994). National Intramural-Recreational Sports Association, 850 SW 15th St. Corvallis, OR 97333-4145.
- Schmid, S. (1990). Wellness on campus. Athletic Business, April, 30-34.

- Schmottlach, N.R., Warren, R., Collins, K., Mehringer, S. (1992). The National Wellness Information Resource Center Directory. Institute for Wellness, Ball State University.
- Schmottlach, N.R., Warren, R., Collins, K., Mehringer, S. (1995). The National Wellness Information Resource Center Directory. Institute for Wellness, Ball State University.
- Schott, F.W., Wendel, S. (1992). Wellness with a track record. Personnel Journal, April, 98-104.
- Snodgrass, M.L., Tinsley, C.E. (1990). Recreation and wellness: Identifying motivations for participation in recreational sports. National Intramural Recreational Sports Association Journal, Fall, 34-38.
- Williams, M. H. (1990). Lifetime fitness and wellness, a personal choice. Dubuque, IA: Wm. C. Brown Publishers.
- Work, J.A. (1989). How healthy are corporate fitness programs? The Physician and Sports Medicine. 17: (3), 226-237.

Appendix

Questionnaire

School _____

Address _____

Department _____ Phone () _____

Name and Title _____

Please check if you would like results sent to you _____

Wellness Services -all services including workshops, assessments, lectures, information, flyers, newsletters, exercise sessions, special events, counseling, education, or rehabilitation intended to compliment the participant's needs as indicated in the wellness dimensions (Gebhardt, 1990).

1. Were you, or are you involved in the development of the wellness program? (Please circle one)

1. Yes 2. No

2. How long has your department offered wellness services?

1. 1st year 2. 2-4 years 3. 5+ years

3. Do you work with other professionals in offering wellness services? 1. Yes 2. No

If yes, indicate on the scale how often you work with them.

<u>Department</u>	<u>Never</u>	<u>Rarely</u>	<u>Sometimes</u>	<u>Often</u>
1. Health Services	0	1	2	3
2. Residential Life	0	1	2	3
3. Campus Recreation	0	1	2	3
4. Prevention Office	0	1	2	3
5. Physical Education	0	1	2	3
6. Counseling	0	1	2	3
7. Campus Police	0	1	2	3
8. Career Placement	0	1	2	3
9. Student Activities	0	1	2	3
10. Other: _____	0	1	2	3

4. Please indicate on the scale how important the following services are to you as a program leader.

<u>Source</u>	<u>not important</u>	<u>somewhat important</u>	<u>very important</u>
Journals	0	1	2
Conferences	0	1	2
Organizations	0	1	2

5. What barriers or roadblocks have you encountered in the establishment of new wellness programs?
Rank in priority order starting with the largest barrier (1).

A. Financial_____ B. Participation_____ C. Interdepartmental Cooperation_____

6. Using the scale from 1-10, circle the number that indicates how much of a barrier the issue listed is.

		<u>not encountered</u>				<u>slight</u>		<u>extreme</u>	
A. Financial Barriers include:									
1. Lack of equipment	1 2	3	4	5	6	7	8	9	10
2. Facility space	1 2	3	4	5	6	7	8	9	10
3. Understaffing	1 2	3	4	5	6	7	8	9	10
4. Budget constraints	1 2	3	4	5	6	7	8	9	10
5. Lack of \$ Prof. Dev.	1 2	3	4	5	6	7	8	9	10
6. Advertising	1 2	3	4	5	6	7	8	9	10

B. Please rate the degree of communication and cooperation: poor fair good excellent

1. Between staff in your department	0	1	2	3
2. Between your department and other departments	0	1	2	3

7. Please comment on any additional barriers you have encountered, and if you have had solutions to some previously mentioned barriers.

Demographic Information (optional)

8. How long have you held the position you are currently working in?

1. <1 year 2. 1-5 years 3. 6-10 years 4. 10+ years

9. How many years of experience in wellness do you have?

1. <1 year 2. 1-5 years 3. 6-10 years 4. 10+ years

10. Gender: Male Female

11. Age: 1. <25 2. 25-30 3. 31-40 4. 41+

12. Undergraduate major: Graduate Major (MS):

- | | | |
|-------|-------------------------------|-------|
| _____ | 1. Recreation/Leisure Studies | _____ |
| _____ | 2. Physical Education | _____ |
| _____ | 3. Health Studies | _____ |
| _____ | 4. Psychology | _____ |
| _____ | 5. Education | _____ |
| _____ | 6. Dietetics | _____ |
| _____ | 7. Other: _____ | _____ |